

MARGIN RESERVED FOR BINDING.
WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the
FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.
McGaw, of Columbia.

Form No. 1.

(1) PLACE OF BIRTH

County of Abbeville S.C.
Township of Abbeville
or
Inc. Town of _____
or
City of _____

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only

12

Registration District No. 100 Registered No. 3
(For use of Local Registrar)
City of _____ (If birth occurs in a hospital or other institution, give name of same instead of street and number.) St. _____ Ward _____

(2) Full Name of Child Robert Harrison Smith

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? _____ (5) Number in order of birth _____ (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan. 27, 1915
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME William Smith
(9) PRESENT POSTOFFICE OF FATHER Abbeville R.F.D. 5th
(10) COLOR OR RACE Negroe (11) AGE AT LAST BIRTHDAY 31 (Years)
(12) BIRTHPLACE Abbeville County
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth Three

MOTHER.

(14) NAME BEFORE MARRIAGE Orilla Beale
(15) PRESENT POSTOFFICE OF MOTHER Abbeville "Stor"
(16) COLOR OR RACE Negroe (17) AGE AT LAST BIRTHDAY 28 (Years)
(18) BIRTHPLACE Abbeville Co
(19) OCCUPATION Housekeeper
(21) Number of children of this mother now living, including present birth Three

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive at _____ M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Louisa M. Davidson

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Medwife Abbeville "Stor R"

Given name added from a supplemental report

(26) Witness _____ (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Jan 27 1915 (28) Louisa M. Davidson Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.